HRD PROPOSAL BUDGET				FOR NSF USE ONLY			
ORGANIZATION				PROPOSAL NO. DURATION (MONTHS)			
ONGARIZATION			' ' ' '		Proposed		
PRINCIPAL INVESTIGATOR/PROJECT DIRECTOR				AWARD	NO.		
A. SENIOR PERSONNEL: PI/PD, Co-Pl's, Faculty and Other Senior Associates NSF FUNDED				FUNDS	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
(List each separately with title, A.6. show number in brackets)		RSON-M		REQUESTED		ATCHING	PROJECT
	CAL	ACAD.	SUMR.	FROM NSF		FUNDS	COSTS
1.	 			\$	\$		\$
2.	 						
3.	 	-					
4.	 	-					
5. () OTHERS (LIST INDIVIDUALLY ON BUDGET EXPLANATION PAGE)	+	-			+		
6. () TOTAL SENIOR PERSONNEL (1-5) B. OTHER PERSONNEL (SHOW NUMBERS IN BRACKETS)	+	 			-		
1. () POST DOCTORAL ASSOCIATES 2. () OTHER PROFESSIONALS (TECHNICIAN, PROGRAMMER, ETC.)	Contraction of the Contraction o						
3. () GRADUATE STUDENTS	<u></u>	J			 	-	
4. () UNDERGRADUATE STUDENTS					1		
5. () SECRETARIAL - CLERICAL					1		
6. () OTHER					1		
TOTAL SALARIES AND WAGES (A+B)							
C. FRINGE BENEFITS (IF CHARGED AS DIRECT COSTS)							
TOTAL SALARIES, WAGES AND FRINGE BENEFITS (A+B+C)							
D. PERMANENT EQUIPMENT (LIST ITEM AND DOLLAR AMOUNT FOR EACH ITEM EXCEEDING \$1000):							
•							
TOTAL PERMANENT EQUIPMENT							
E. TRAVEL 1. DOMESTIC (INCL. CANADA AND U.S. POSSESSIONS)							
2. FOREIGN							
E DARTIGIOANT CUIDDORT COCTO							
F. PARTICIPANT SUPPORT COSTS Stipend Travel S	ubsist.	Other					
a. K-12 (Students) # \$ \$.		\$					
b. K-12 (Teachers) # \$\$		s					
c. Undergraduate #\$\$		\$		44 9			
d. Graduate #\$\$		s					
e. Faculty # \$ \$		s					
() TOTAL PARTICIPANT COSTS						<u></u>	6 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
G. OTHER DIRECT COSTS							
1. MATERIALS AND SUPPLIES					*****		
2. PUBLICATION COSTS/PAGE CHARGES				-			
3. CONSULTANT SERVICES							
4. COMPUTER (ADPE) SERVICES							
5. SUBCONTRACTS				-			
6. OTHER							
TOTAL OTHER DIRECT COSTS							
H. TOTAL DIRECT COSTS (A THROUGH G)							
I. INDIRECT COSTS (SPECIFY)							
TOTAL INDIRECT COSTS							
J. TOTAL DIRECT AND INDIRECT COSTS (H + I)				ļ			
K. RESIDUAL FUNDS (IF FOR FURTHER SUPPORT OF CURRENT PROJECTS	SEE GPM	252 AN	D 253)				
L. AMOUNT OF THIS REQUEST (J) OR (J MINUS K)				\$	\$		\$
PVPD TYPED NAME & SIGNATURE*	DATE					SF USE ONL	
				INDIRECT COST RATE VERIFICATION			
INST. REP. TYPED NAME & SIGNATURE*	DATE		Date C	Date of Rate Sheet Initiate-DGA			